



Atty. Dkt. No. 10001992-1

~~\$RCE~~  
2626  
JPW

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Michelle E. EVANS  
Title: CORRECT ORDER  
OUTPUT  
Appl. No.: 09/746659  
Appl. Filing Date: 12/19/2000  
Examiner: Grant II, Jerome  
Art Unit: 2626

<b>CERTIFICATE OF MAILING</b> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.  Karen Meier (Printed Name)   (Signature)  08/08/05 (Date of Deposit)
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**REQUEST FOR CONTINUED EXAMINATION (RCE)**  
**TRANSMITTAL**

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

08/10/2005 SHASSEN1 00000032 082025 09746659  
01 FC:1801 790.00 DA

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. **Submission required under 37 C.F.R. §1.114:** (check items that apply)

a. Enclosed are:

- ☒ Amendment/Reply.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of \_\_\_ listed reference(s).

☐ Other .

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	18	- 18	= 0	x \$50.00	= \$0.00
Independents	3	- 3	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$120.00	0	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$450.00		\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,020.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,590.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,160.00		\$0.00
EXTENSION FEE SUBTOTAL:			\$0.00
EXTENSION FEE ALREADY PAID: -			\$0.00
EXTENSION FEE TOTAL			\$0.00
CLAIMS AND EXTENSION FEE TOTAL:			\$790.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):			\$0.00
<input type="checkbox"/> Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:			\$790.00

☒ Please charge Deposit Account No. 08-2025 in the amount of \$790.00. A duplicate copy of this transmittal is enclosed.

☐ A check in the amount of \$790.00 to cover the filing fee is enclosed.

[ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 08-2025. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 08-2025.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 3, 2005

By Todd A. Rathe

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Telephone: (414) 297-5710  
Facsimile: (414) 297-4900

Todd A. Rathe  
Attorney for Applicant  
Registration No. 38,276